Attorney Docket No.: 019680-008300US

## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated bel-	ownext to my name; I believe I am the original, first and sole
inventor (if only one name is listed below) or an original, first and ju	oint inventor (if plural inventors are named below) of the subject
matter which is claimed and for which a patent is sought on the inv	vention entitled: GRAPHICS DEVICE CLUSTERING WITH
PCI-EXPRESS the specification of which X is attached hereto	or was filed on as Application No and
was amended on (if applicable).	

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Practitioners at Customer Number 20350 Stephen H. Pettigrew, Reg. No. 35,978 Richard B. Domingo, Reg. No. 36,784 Paul Carmichael, Reg. No. 18,679 Joseph A. Vo, Reg. No. 43,971

Send Correspondence to:

Jonathan M. Hollander

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8<sup>th</sup> Floor
San Francisco, California 94111-3834

Direct Telephone Calls to:
(Name, Reg. No., Telephone No.)
Name: Jonathan M. Hollander
Reg. No.: 48,717
Telephone: 415-576-0200

Full Name of	Last Name:	First Name:	Middle Name or 1	nitial:
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Residence & Citizenship:	City: Mountain View	State/Foreign Country: California	Country of Citizen	nship:
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Full Name of Inventor 2:	Last Name: REED	First Name: DAVID	Middle Name or I	nitial:
Residence & Citizenship:	City: Saratoga	State/Foreign Country: California	Country of Citizenship: Canada	
Post Office Address:	Post Office Address: 18801 Ten Acres Road	City: Saratoga	State/Country: California	Postal Code: 95070
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Full Name of Inventor 4:	Last Name: COX	First Name: MICHAEL	Middle Name or I BRIAN	nitial:
Residence & Citizenship:	City: Menlo Park	State/Foreign Country: California	Country of Citizen United States	
Post Office Address:	Post Office Address:  1 Alder Place	City: Menlo Park	State/Country: California	Postal Code: 94025

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Franck R. Diard	David G. Reed	Gary D. Hicok
Date 02/18/04	Date 2/25/04	Date

Signature of Inventor 4

Michael Brian Cox

Date 2/25/04

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P.08 P.03

Attorney Docket No.: 019680-008300US

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(Name, Rog. No., Telephone No.)

Name: Jonathan M. Hollander

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Post Office Address:	Post Office Address: 282 Monroe Drive #12	City: Mountain View	State/Country: California	Photol Code:
Full Name of Inventor 2:	Last Name; REED	First Name: DAVID	Middle Name or t	ritial:
Residence & Citizenship:	Cay: Saratoga	State/Foreign Country: California	Country of Citizenship;	
Post Office Address:	Post Office Address: 18801 Ten Acres Road	City: Sarutogu	State/Country. California	Postal Code: 95070
Full Name of Inventor 3:	Last Name; HICOK	First Name: GARY	Middle Name on fo	
Residence & Citizenship:	City Mesa	State/Foreign Country: Arizona	Country of Citizenship: United States	
Post Office Address:	Post Office Address: 1061 N. Omaha Circle	City: Mesa	State/Country: Arizona	Pagai Code:

Attorney Docket No.: 019680-008300US

Full Name of Inventor 4: Residence &	Last Name: COX City:	First Name: MICHAEL	Middle Name or Initial: BRIAN
Citizenship:	Menio Park	State/Foreign Country: California	Country of Citizenship: United States
Address:	Post Office Address:  1 Alder Place	City: Menlo Park	State/Country: Postal Code: California 94025

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Franck R. Diard	David G. Reed	Gary B. Hicok
Date	Date	Date 2/18/07
Signature of Inventor 4		
Michael Brian Cox		
Date		
60096891 v1		

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